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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

gh re Application of

ANTHONY J. CAFFERATA ET AL

U.S. Serial No. 10/699,335

Group Art Unit 3728

Filed: October 31, 2003

Examiner: D. Fidel

DISPLAY PACKAGE WITH STABILIZING AND INDEXING MEANS

No additional fee is required.

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment after final rejection / α response in the above-identified application.

An additional fee is required as calculated below -Other Than A Claims Small Entity Highest No. Small Entity Remaining Previously Addnl. After Present Addnl. Paid For Rate Fee Amendment Extra__ x \$ 25 \$ x\$ 50 \$ Total Minus * Minus *___ x \$100 \$ x\$200 \$ Indep First Presentation of Mul Dep Claim..... x \$180 \$ x\$360 \$

* The "Highest Number Previously Paid For" (Total or Independent) is the highest number of claims filed originally or highest number found from equivalent box of a prior amendment.

Total Additional Fee.....\$\$

- X This response is being filed within the period for response.
- ____ Applicant(s) hereby petition for an extension from the date of the Examiner's Action as follows:

	Extension				
	n Extension				
 Third-Month	Extension	\$ 510.00	/	\$1020.0	0

Small entity status of this application has been established.

A Check in the amount of \$\ 0.00 \ is attached hereto. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 02-3690 of the undersigned attorney. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Date: November 16, 2006

(703) 684-6885

Mary J. Breiner, Reg. No. 33,161

Attorney of Record



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D. Fidel, Examiner

DISPLAY PACKAGE WITH STABILIZING AND INDEXING MEANS

Racine, Wisconsin November 16, 2006

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

AMENDMENT AFTER FINAL REJECTION

Dear Sir:

This is in response to the official action mailed September 21, 2006. Please amend the captioned application as set forth below.